

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00111278	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Kqys-am		Date M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 216 W Spring		Amount 360.00	
City State Zip Code Neosho MO 64850		Transaction ID: E08604DEB668C4D1896F	
Purpose of Expenditure S2MO00353 Ad		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: JAMES MATTHES TALENT		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 82668.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2006	
Full Name (Last, First, Middle, Initial) of Payee Knot-am		Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 1117 W. Rt 66		Amount 273.11	
City State Zip Code Flagstaff AZ 86001		Transaction ID: EF819C08A62A34F148B9	
Purpose of Expenditure H2AZ01172 Ad		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Rick Renzi		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3237.97		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2006	
(a) SUBTOTAL of Itemized Independent Expenditures		633.11	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Carol Tobias Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 9	